

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 166
Registered No. 23

1. PLACE OF BIRTH

County Gila State Arizona
District or Township _____ or Village _____
City Hayden No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Maria Rosa
(If child is not yet named, make supplemental report, as directed.)

3. Sex of Child Female To be answered ONLY in event of plural births.
4. Twin, triplet or other _____ 6. Legitimate? Yes
5. No., in order of birth _____ 7. Date of birth May 17, 1929
Month _____ Day _____ Year _____

8. FATHER
Full name Santiago River
9. Residence (Usual place of abode) Hayden
If non-resident, give place and state.

10. Color or race Mexico
11. Age at last birthday 25 (Years)

12. Birthplace (city or place) Guana Juato
(State or country) Mexico

13. Occupation Expor
Nature of industry

14. MOTHER
Full maiden name Angelita Duarte
15. Residence (Usual place of abode) Hayden
If non-resident, give place and state.

16. Color or race Mexico
17. Age at last birthday 18 (Years)

18. Birthplace (city or place) Guana Juato
(State or country) Mexico

19. Occupation House wife
Nature of industry

20. Number of children of this mother 2
(Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 2
(b) Born alive but now dead 0
(c) Stillborn _____

21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was _____ at 6:00 p.m. on the date above stated.
(Born alive or stillborn.)

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.
Signature Gerama Jaramez
(Physician or midwife)

Given name added from a supplemental report _____ Address Hayden Arizona
Month, day, year

Filed May 15, 1929 Registrar W. B. Mack

492-312-145